Scituate Community Preservation Committee **Funding Request Form**

DATE and YEAR of Application: 27 JUNE 2822

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APPLICANT INFORMATION
Project Sponsor or Organization: SCITVATE BEACH COMMISSION
Contact Name & Address: KELLY BOWER 28 EDCAR PO SCITUAT
Telephone Number: 781 264 7628 Email: Kelly, bower o gunail.
PROJECT INFORMATION
CPA CATEGORY (check all that apply):
OPEN SPACE RECREATION
☐ HISTORIC PRESERVATION ☐ COMMUNITY HOUSING
NAME OF PROJECT: SAND HILLS BEACH MOBY MAT
BRIEF DESCRIPTION OF PROJECT: THE MOBIL MAT AT THE SOUTHERN
ENTRANCE TO SAND HILLS BEACH HAS DETERIORATED AND
HAS BEEN REMOVED FROM SERVICE. WE NEED TO REPLACE THU
MOBI MAT. Attach additional pages including summary, budget, estimated timeline and justification of need.
Project Location or Address: SANP HILLS BEACH
Include map, photo and other imagery for ALL category projects.
If Open Space or Community Housing:
Assessor's Map Page, Block & Lot Number:
Number of acres in parcel:
Current Zoning Classification:
Assessed Value:
Title in name of:Title Abstract Date:
Number of housing units proposed:
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MOBI MATS HAVE BEE ACCESS EASIER FOR	ALL SKILL LE	VELS.	
PERMITS AND APPROVALS			
What permits and approva	Is are required? Have	they been obtained	or have you filed for them?
Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)
NA			
		216	- towns the outcomes of
Have you met with any oth	er Town Boards or co	mmittees! II so, wn	at were the outcomes or
those meetings? (Letters of si	upport from other Boards	and committees should b	E memmen in one abbutention of
supplied at a later date.) KEVI	SUPPLY DIDLE	PUBLIC GROW	VOS
CORRY MILES, CO	ASTAL ALALASTA	DATT ARCHEDI	
TO THE TOTAL CO	Maine Motore		
Notes:			
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Proposed Funding

Total Project Cost	CPC Funds Requested	Sources of Funds other than CPA	Amount	Funding Secured? (Y/N)*
\$ 13051,59	\$ 13051.59	N/A	\$	
			\$	
			\$	
			\$	
			\$	

			\$	
		* If the request is still outstanding	ng, when do you ex	spect to hear a decision?
THER COMMENTS				
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opies provided to	CPC Members on			
dditional informa	ation required:			
ommittee Vote				
otes:	Yes / No	Votes: Y/N/Abstain	Date	
ecommend to own Meeting				
her:				